



Report for the File No. 425

## **EHP II Year 4 Quarterly Report 1 July–September 2002**

**February 2003**

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**U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT**  
BUREAU FOR GLOBAL HEALTH  
OFFICE OF HEALTH,  
INFECTIOUS DISEASES AND NUTRITION  
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**ENVIRONMENTAL HEALTH PROJECT**

**EHP II Year 4 Quarterly Report 1**  
**July–September 2002**



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# Abbreviations

ANDA	National Aqueduct and Sewerage Administration (Administración Nacional de Acueductos y Alcantarillados), El Salvador
BASICS	Basic Support for Institutionalizing Child Survival
CAPRE	Regional Potable Water Committee (Comité de Agua Potable para la Región)
CECI	Canadian Center for International Studies and Cooperation
CORE Group	Child Survival Collaborations and Resources Group
COSUDE	Swiss Agency for Development and Cooperation (Agencia Suiza para el Desarrollo y la Cooperación)
DHS+	MEASURE Demographic and Health Survey
DIGESA	General Directorate of Environmental Health (Dirección General de Salud Ambiental), Peru
DRC	Democratic Republic of Congo
ECHO	Environmental Change and Health Outcomes
ECHO/IVM	ECHO Integrated Vector Management
ECHO/XS	ECHO Cross-Sectoral Surveillance
EHP	Environmental Health Project
EHP II	EHP Phase II
ENACAL	Nicaraguan Water and Sewage Company (Empresa Nicaragüense de Acueductos y Alcantarillados)
EWARS	Early Warning Reporting System
GESCOME	Community Management of Environmental Health (Gestion Communautaire de la Santé Environnementale), Benin
HAMSET	HIV/AIDS, malaria, sexually transmitted diseases, and tuberculosis
INAPA	National Water Supply and Sewerage Institute (Instituto Nacional de Aguas Potables y Alcantarillados), Dominican Republic

INSTAT	National Statistics Institute (Institut National de la Statistique), Madagascar
IVM	integrated vector management
MEASURE	Monitoring and Evaluation to Assess and Use Results
MICET	Madagascar Institute for the Conservation of Tropical Ecosystems (Madagascar Institute pour la Conservation des Ecosystèmes Tropicaux)
MINSA	MOH (Ministerio de Salud), Nicaragua
MISAU	MOH, Mozambique
MOH	ministry of health
MVDP	Malaria Vaccine Development Program
NGO	nongovernmental organization
PfEMP1	<i>Plasmodium falciparum</i> erythrocyte membrane protein 1
PROARCA	Central American Environmental Program (Programa Ambiental Regional para Centroamérica)
PVO	private voluntary organization
SAF	Department for Development, Church of Jesus Christ, Madagascar
SAFE Project	Sanitation and Family Education Project, Bangladesh
SIMA	System-Wide Initiative on Malaria and Agriculture
SINAS	National Water and Sanitation Information System (Sistema de Información Nacional en Agua y Saneamiento), Nicaragua
UNICEF	UN Children's Fund
USAID	U.S. Agency for International Development
VS/IPI	Voahary Salama/Integrated Programs Initiative, Madagascar
VWS	Village Water and Sanitation Program
WELL	Water and Environmental Health at London and Loughborough
WHO	World Health Organization

WHO/AFRO	WHO Regional Office for Africa
WS&S	water supply and sanitation
XS	cross-sectoral surveillance



# Task Order 1

## Task 1: Work Plan

### Overview

Task 1 in Task Order 1 is the development and finalization of the yearly Environmental Health Project (EHP) work plans. Preparing the plan for the upcoming year of the project requires extensive assessments of existing activities; discussions and meetings with the U.S. Agency for International Development (USAID), the EHP technical staff, and subcontractor representatives; and the preparation of outlines, drafts, and final approved plans.

### Activities and Accomplishments

- No activities this quarter.

### Plans for Next Quarter

- Obtain formal signed approval of the Year 4 Work Plan from the CTO.
- Monitor all new activities to make sure they conform to the Year 4 Work Plan (no staff time will be charged to this activity).

### Issues and Problems

- Written approval of the Year 4 Work Plan was not received.

## Task 2: Policy and Lessons Learned

### Overview

Task 2 includes the following five subtasks: indicators, performance monitoring, meetings and reports, partnerships, and lessons learned.

The purpose of **indicators** is to improve the validity and reliability of existing hygiene improvement indicators and data collection methods and the development of new indicators and methods where necessary. This activity is implemented at four levels: Improving local monitoring to assist programmatic decision-making; Increasing community participation in planning and monitoring; International consensus-building

for key WSH indicators and data collection methods; and Document the strengths and weaknesses of indicators, instruments and systems. Indicators and instruments are being developed and field-tested as precursors for final products. EHP has established a close collaboration with the several international organizations and PVOs to implement this activity. Key partners include WHO, UNICEF, UNDP, WELL, MACRO, WELL, the World Bank, and NGO/PVOs.

**Performance monitoring** is essential for EHP's ability to monitor progress and achievements of activities under its core tasks. It addresses management and dissemination needs internal to the project and of USAID. This task ensures that M&E plans are developed, for EHP as a whole as well as CESH, ECHO and field programs; systems and procedures are in place to track activities from planning through implementation to evaluation; and a quality management process of reviews and progress monitoring is implemented.

The purpose of the **meetings and reports** subtask is to communicate information about EHP's technical areas of interest to wider audiences. Meetings, conferences, and workshop are organized, supported, and/or attended, and reports or articles are published for promoting environmental health and the learning of the project. Reports and meetings may address policy issues, the state of environmental-health-related knowledge, or results of EHP activities.

The purpose of the **partnerships** subtask is to establish and maintain communication with other organizations and to identify opportunities for collaboration to achieve common goals. Working in partnership is an essential element for EHP to achieve its goal of mainstreaming the primary prevention of diarrhea, malaria, and acute respiratory infection within the child survival context. The following types of organizations are targeted for collaboration: USAID cooperating agencies, United Nations and other international agencies, private and nongovernmental organizations (PVOs and NGOs), the Office of Private and Voluntary Cooperation of the USAID Bureau for Humanitarian Response, and private commercial-sector partners.

Capturing the **lessons learned** from EHP's experience and keeping USAID updated on the project's progress are accomplished by regular technical and management meetings of EHP and USAID staff. In addition, this subtask includes maintaining the project's e-rooms and responding to non-activity-specific e-mails.

## **Indicators—Improved Targets, Indicators, Monitoring and Evaluation for Water Supply, Sanitation and Hygiene (TIME for WSH)**

### **Activities and Accomplishments**

- CESH monitoring and evaluation: Several monitoring and evaluation activities have been reprogrammed under CESH in the year four work plan as indicated below. See the CESH section of the report for details.

Result 1: Improve program-level hygiene improvement monitoring (water/sanitation, health/child survival)

- CESH tool: hygiene improvement quantitative assessment guide (a HIF-based assessment & planning tool, see CESH workplan for actual product) list of hygiene improvement survey questions completed.
- Draft survey instruments (household and school) to monitor Vision 21 targets: LSHTM will solicit country applications to field test instrument; EHP plans to field test in a country with CEH activities.
- Support of monitoring and evaluation within other EHP activities and task orders including West Bank and India.

Result 2: Improve community monitoring

- Literature review on participatory monitoring completed (see CESH)

Result 3: Strengthen WSH monitoring at an international level

- Continued working with MACRO/Measure DHS+ to improve indicators for water, sanitation and hygiene.

Result 4: Document the strengths and weaknesses of indicators, instruments and systems

- None.

- Hygiene Improvement Quantitative Assessment Tool (HIQAT)

List of hygiene improvement survey questions developed.

## List of Products

- Revised list of hygiene improvement survey questions

## Plans for Next Quarter

Result 1: Improve program-level hygiene improvement monitoring (water/sanitation, health/child survival)

- Revise the hygiene improvement quantitative assessment tool (see CESH work plan for details).
- Field test indicators and draft survey instruments (household and school) to monitor Vision 21 targets.

- Collaborate with CORE and CSTS in the process of revising and/or expanding the hygiene improvement indicators.
- Support of monitoring and evaluation within other EHP activities and task orders.

#### Result 2: Improve community monitoring

- Develop a draft guide for community monitoring of hygiene improvement (see CESH for a full description of this activity)

#### Result 3: Strengthen WSH monitoring at an international level

- Continue communication with the HH/C-IMCI task force on indicators with examples where WSH indicators have been used successfully.
- Continue working with MACRO/Measure DHS+ to improve indicators for water, sanitation and hygiene included in the DHS and expand data collection to include urban slums.

#### Result 4: Document the strengths and weaknesses of indicators, instruments and systems

- Collaborate with other USAID projects in improving water supply, sanitation and hygiene indicators.

## **Performance Monitoring**

### **Activities and Accomplishments**

- Reviewed SOW for technical quality and consistency with EHP goal and results
- Produced quarterly and annual reports (Information Center)
- Performed technical reviews and activity support routinely and as required with a focus on: Respond to information requests or feedback related to environmental health issues in general and monitoring and evaluation specifically (coordination with other EHP/USAID staff)
- M&E Plan for project-level and Task/Activity-specific indicators monitored:
  - All EHP activities reported Y3 achievements and progress of performance indicators

### **List of Products**

- Draft Annual Performance and Milestone Report

## **Plans for Next Quarter**

- Track EHP performance monitoring indicators based on end-of-project results for each task and key activities.
- Review SOW's routinely
- Produce quarterly and finalize annual reports (Information Center)
- Perform technical reviews and activity support routinely and as required

## **Meetings and Reports**

### **Activities and Accomplishments**

- Dropped plans for preparation of a report analyzing USAID investments in water supply, sanitation, and hygiene promotion due to lack of data; began investigating an alternative topic.
- Submitted ideas for four panel presentations for the 2003 Annual Meeting of the Global Health Council, which will focus on environmental health: 1) mainstreaming prevention of childhood diarrhea in child health programs; 2) improving child health in urban slums and squatter settlements; 3) integrated vector management for disease control in Africa, and advantages and strategies of integrated programs (jointly with Population Action International).

## **Plans for Next Quarter**

Follow up with USAID related to "Food Security, Nutrition and Hygiene" policy report.

## **Partnerships**

### **Activities and Accomplishments**

- Participated in plenary and country cluster meetings of USAID's Bureau for Global Health Working Group on Community Integrated Management of Childhood Illness (C-IMCI) along with interested USAID, cooperating agency, and PVO staff.
- Participated in the Nicaragua request for mission partnership country cluster planning meetings and assisted in the development of a memorandum of understanding with the mission.
- Participated in the Child Survival Collaborations and Resources (CORE) Group's fall membership meeting and assisted in preparation of the work plan of CORE's IMCI Working Group which focuses on activities supporting the multi-sectoral platform approach to C-IMCI.

- Participated in a meeting of the Interagency Working Group on C-IMCI in Geneva, Switzerland, in September; presented EHP activities related to C-IMCI in Peru and Nicaragua and provided input to a briefing package to develop a cadre of experts in C-IMCI.
- Prepared call for abstracts sent to U.S. PVOs for the Latin America Regional Expert Consultation on C-IMCI to be held in February 2003 in Nicaragua with Basic Support for Institutionalizing Child Survival (BASICS) and CORE .
- Prepared assessment for integrating environmental health into C-IMCI programs for the Expert Consultation mentioned above.
- Participated in a World Bank steering committee meeting on the initiative for public-private partnership in support of handwashing; reviewed progress in country programs; and discussed potential involvement of EHP in Nepal and in developing a monitoring and evaluation framework for the initiative.

### **Plans for Next Quarter**

- Continue routine contacts with international organizations and other partners and joint activities
- Participate in meetings on monitoring and evaluation of the Initiative for Public Private Partnership for Handwashing with Soap.

## **Lessons Learned and Progress**

### **Activities and Accomplishments**

- Kept USAID up to date on the project through regular meetings, captured lessons learned, and coordinated staff activities.

### **Plans for Next Quarter**

- Continue routine activities.

## **Task 3: Community-Based Environmental Sanitation and Hygiene (CESH)**

### **CESH Core Activities**

#### **Overview**

Interventions under CESH develop, apply, and disseminate tools that help NGO and government program managers and communities identify local environmental health

priority conditions and behaviors and guide selection and evaluation of actions to reduce the incidence of diarrhea in children under five years of age. The task is scheduled to continue for the duration of EHP. The activities under the task are expected to contribute to USAID Office of Health results 6 and 7 by developing a project approach to diarrhea prevention.

CESH works in four major areas: 1) operations research, 2) environmental sanitation policy, 3) development of tools for diarrheal disease prevention, and 4) field application of those tools in USAID-supported Population, Health and Nutrition (PHN) countries.

## **Operations Research**

### **Activities and Accomplishments**

- Reviewed first and second drafts of a report on the safe disposal of children's excreta, prepared under contract by the International Institute for Nutrition (IIN) in Peru.
- Initiated a discussion with the Centers for Disease Control and Prevention (CDC) and USAID/Zambia on their joint exploration of the impact of household water chlorination on households with family members who have HIV/AIDS; drafted scope of work.

### **Plans for Next Quarter**

- Finalize research program with CDC and USAID/Zambia on household chlorination and HIV/AIDS.
- Submit comments on the second draft of the report on the safe disposal of children's excreta back to IIN so that the documents can be finalized.

## **Environmental Sanitation Policy**

### **Activities and Accomplishments**

- Completed the sanitation policy guidelines.

### **Key Products**

- EHP Strategic Report 2: Guidelines for the Assessment of National Sanitation Policies.

### **Plans for Next Quarter**

- Disseminate the guidelines.

- Identify opportunities for EHP to apply the guidelines.

## **Development of Tools for Diarrheal Disease Prevention**

### **Activities and Accomplishments**

- Refined the quantitative assessment tool with consultant input.
- Began preparation of the Action Learning Package: Behavior-Centered Programming for Hygiene Improvement and Diarrheal Disease Prevention; work included: 1) a workshop to define the purpose, audience, components, and methodology; 2) development of the scope of work for preparing the package; and 3) core competencies meeting with Manoff, the EHP consortium group member that will prepare the package.
- Reviewed a draft of a hygiene improvement framework advocacy document prepared under contract by a consultant and gave comments to the consultant.
- Reviewed a second draft of the document including a section on integration of hygiene improvement activities in various child health programs.

### **Plans for Next Quarter**

- Prepare draft for review.
- Continue to review the quantitative assessment tool.
- Support the Manoff Group as they work under contract to prepare the behavior-change programming guide for diarrheal disease reduction.
- Engage a consultant to assist the PVO NicaSalud in Nicaragua in initial drafting of a community-based participatory monitoring and evaluation tool, user guide and user training module. Initially the tool will be tailored for Nicaragua but will subsequently be generalized.
- Solicit the participation of the U.N. Children's Fund (UNICEF) in production of the hygiene-improvement-framework advocacy document.
- Finalize the document.
- Develop and carry out a dissemination and advocacy strategy for the document.

### **Issues and Problems**

- Finalizing the hygiene improvement advocacy document is proving difficult because of differing views among EHP staff on the "enabling environments" section.

- It is also proving difficult to engage UNICEF in a discussion of its possible role in production of the hygiene improvement advocacy document.

## **Field Application of Tools for Diarrheal Disease Prevention**

### **Activities and Accomplishments**

- Continued fieldwork in Peru and Nicaragua in participation with the Pan American Health Organization (PAHO), ministries of health, and local NGOs on developing and field-testing a module on diarrheal disease prevention in PAHO C-IMCI programs.
- Was instrumental in getting USAID Nicaragua to fund a consultant for hygiene behavior change activities in Nicaragua as follow-up to the Nicaragua water, sanitation, and hygiene project.
- Initiated a new activity in Nepal in partnership with the Asian Development Bank (ADB) to prepare a national rural water supply and sanitation sector policy.

### **Plans for the Next Quarter**

- See field programs, below.

## **CESH Field Programs**

### **Benin: GESCOME II**

#### **Overview**

GESCOME II is the continuation of GESCOME I, a Community Involvement in the Management of Environmental Pollution activity under EHP I, which ran from 1997 to 1999. Benin program activities consisted of refining EHP's community-based approach, applying it in the field, conducting operations research and scale-up activities, and promoting environmental sanitation policies. Project activities were essentially completed May 1, 2001. However, lessons learned activities are ongoing and will continue under a new scope of work.

#### **Activities and Accomplishments**

- Continued work on documents to be prepared as follow up to the GESCOME program: final report and lessons learned.

#### **Plans for Next Quarter**

- Finalize the two documents.

# **Democratic Republic of the Congo: Technical Assistance to SANRU III**

## **Overview**

EHP is assisting the SANRU III project in implementing the water supply and sanitation component. SANRU III is a five-year \$25 million rural health project, which includes a wide range of primary health care interventions and operates in 63 of 300 health zones. The goal of EHP assistance is to strengthen the management capacity of zonal water and sanitation coordinators to carry out a hygiene behavior change program that will result in a decrease in diarrheal disease incidence.

## **Activities and Accomplishments**

- Developed a two-year action plan for hygiene improvement in the water supply and sanitation component of SANRU III.
- Developed a scope of work for the first two activities in the action plan relating to the development of a hygiene behavior change strategy; identified a consultant; completed all arrangements for the first visit in October.
- Conducted the first workshop for zonal water supply and sanitation coordinators (workshop was conducted by members of the national training team).
- Contracted with the School of Public Health, University of Kinshasa, to carry out formative research and assist in developing the behavior-change strategy.

## **Plans for Next Quarter**

- Develop a hygiene behavior change strategy that will be piloted in ten pilot zones where SANRU is working.
- Visit project in October and December.
- Complete the two-year action plan to integrate hygiene improvement into the water and sanitation component of SANRU III.

## **Issues and Problems**

- The second training of trainer workshop for the zonal water supply and sanitation coordinators was postponed until May 2003.

## **Honduras: Development of Supervisory System for Environmental Health Technicians**

### **Overview**

USAID has been working with the Honduran Ministry of Health since 1993 in the development of an integrated environmental health program. To date, the ministry has trained 270 Environmental Health Technicians (TSAs) and is in the process of training 50 supervisory TSAs. More TSAs are to be trained during 2002. Because of the growth in the TSA program, USAID/Honduras has requested that EHP provide an advisor in environmental health to assist the ministry to develop a working model for TSA supervision, task definition, evaluation, and reporting.

### **Activities and Accomplishments**

- Made arrangements for the second visit of the EHP consultant.

### **Plans for the Next Quarter**

- Conduct second visit in October.

### **Issues/Problems**

- The second visit was to have taken place in August 2002, but was postponed due to the dengue outbreak in Honduras and the resulting lack of availability of key ministry officials.

## **Latin America and the Caribbean: Sanitation in Small Towns**

### **Overview**

EHP is developing practical guidance for USAID missions and contractors on improving sanitation in small towns. This activity builds on EHP's previous decentralization work in Latin America and the Caribbean that focused on small towns and rural areas. EHP has developed a draft overview document that defines the problem and a methodology that can be used to develop a plan to improve sanitation services in small towns.

### **Activities and Accomplishments**

- Completed the Jamaica field test.
- Completed planning for the Peru workshop: identified and invited participants, designed workshop, prepared materials.
- Initiated planning for the Honduras workshop.

- Completed and published the final document that will combine the overview and methodology.
- Translated the final document into Spanish.

### **Key Products**

- EHP Strategic Report 3: Improving Sanitation in Small Towns in Latin America and the Caribbean.
- Article on sanitation in small towns published in July issue of Waterlines.

### **Plans for Next Quarter**

- Conduct a regional workshop in Cuzco, Peru, October 1–3.
- Continue planning for the Honduras workshop.
- Identify country-specific follow-up actions resulting from the two workshops.

## **Task 4: Environmental Change and Health Outcomes (ECHO)**

ECHO, Task 4 of Task Order 1, is divided into two parts. Task 4A covers cross-sectoral surveillance and integrated vector management, with the focus on malaria prevention and control; Task 4B covers integrated health-environment programs.

### **Task 4A: ECHO: Cross-Sectoral Surveillance (XS) and Integrated Vector Management (IVM)**

ECHO/XS activities are designed to develop methods for performing the integrated analysis of epidemiological, environmental, demographic, and other data to improve the prevention and control of malaria, other vector-borne diseases, and other environmental health problems. Work under this task consists of: 1) developing and testing methods for cross-sectoral surveillance; 2) creating tools to promote cross-sectoral surveillance as national policy and applying them in three countries; and 3) institutionalizing cross-sectoral surveillance approaches in three countries. Most work is conducted in the context of field activities.

ECHO/IVM activities determine the effectiveness of vector-control interventions and identify the settings in which they are likely to be effective, particularly in urban and rural settings in Africa. IVM approaches are promoted as part of official national malaria control plans and procedures. The emphasis is on developing better tools for vector control, including promoting the use of environmental management and larval control, developing IVM strategies appropriate to particular settings, and promoting community participation in vector-control programs.

## **ECHO/XS Core Activities**

### **Activities and Accomplishments**

- Held a technical working group (TWG) meeting at the end of September to establish a partnership with Columbia University's International Research Institute for Climate Prediction.
- Identified three principal products that will be the output of the partnership mentioned above: 1) risk stratification maps; 2) seasonal malaria forecasts; and 3) current surveillance of conditions conducive to malaria.

### **Plans for Next Quarter**

- Produce a report on the TWG meeting and an EHP Brief highlighting work on cross-sectoral surveillance.

## **ECHO/IVM Core Activities**

### **Activities and Accomplishments**

- Initiated a new activity to examine projects under development at the World Bank pipeline for sub-Saharan Africa to identify those that might inadvertently increase malaria breeding sites (e.g., agriculture, road building); identified list of about 75 potential projects through a search of the Bank's electronic files.

### **Plans for Next Quarter**

- Examine documentation on World Bank projects mentioned above and narrow the list to approximately ten.
- Finalize arrangements for a field test of the vector-control needs assessment protocol to be conducted in Eritrea with leadership from WHO/AFRO.

## **ECHO/XS and IVM Field Programs**

### **Eritrea: Technical Assistance to the Eritrea National Malaria Control Program**

#### **Overview**

EHP is providing technical assistance to the Eritrea National Malaria Control Program to help strengthen its operational research, surveillance systems, and vector-control activities.

## **Activities and Accomplishments**

- Sent entomologist from the staff of the Danish Bilharziasis Laboratory to Eritrea to review protocols for entomological monitoring of mosquito populations at sentinel surveillance sites and to make recommendations for improving protocols.
- Monitored the status of the larval control pilot program underway in four villages; evaluated the data collected; modified plans as needed.

## **Key Products**

- Malaria Vector Control Studies in Eritrea (activity report ready for editing).
- Malaria Vector Studies in Eritrea (activity report ready for editing).

## **Plans for Next Quarter**

- Prepare interim report on larval control pilot study.

## **Mozambique: Technical Assistance to the National Malaria Control Program**

### **Overview**

EHP provided technical assistance to the Ministry of Health in Mozambique (MISAU) to improve malaria surveillance in Maputo, develop MISAU's capacity for using GIS, and identify areas of Maputo with the highest risk of malaria. Local health officials will use this information to target malaria control interventions in Maputo. The activity also supported the USAID mission's efforts to design an expanded program of technical assistance for the National Malaria Control Program. Work began under the previous EHP contract (EHP I) and continued until March 2002 when funding was exhausted. USAID/Mozambique decided not to pursue further work under EHP; as a result, all activities in Mozambique are now complete, and no further work is anticipated.

## **Activities and Accomplishments**

- Organized records and deliverables to support preparation of the final report. Made arrangements for final disposition of property purchased with project funds.

## **Plans for Next Quarter**

- Complete activity report on risk stratification in Mozambique.

## **Nepal: Program for the Prevention and Control of Selected Infectious Diseases**

### **Overview**

EHP is providing assistance to help strengthen the institutional capacity of the Vector-Borne Disease Research and Training Center (VBDRTC) at Hetauda, Nepal, and to assist the Ministry of Health in improving its surveillance and control programs for malaria, kala-azar, and Japanese encephalitis. Comprehensive information on this activity may be found in the trimesterly reports prepared by EHP's project office in Nepal.

### **Strengthening VBDRTC's Institutional Capacity**

#### **Activities and Accomplishments**

- Conducted orientation training on malaria for 26 mother and child health and village health workers from Udayapur District on July 1 and for 40 health workers from Saptari district on July 3.
- Facilitated training of trainers on microscopy and refresher training on Japanese encephalitis diagnosis organized by the National Public Health laboratory and EHP.
- Recruited four additional personnel for the VBDRTC: deputy director for management, laboratory assistant, social scientist, and computer assistant.
- Agreed on April 2003 as the date for the evaluation of VBDRTC's performance by USAID.
- Entered into a tripartite memorandum of understanding between USAID, EHP, and the VBDRTC board outlining the responsibilities of the parties.

### **Improving Surveillance of the Ministry of Health**

#### **Activities and Accomplishments**

- Monitored improved EWARS activities at the eight pilot sites using a comprehensive checklist of EWARS and laboratory functions.
- Began process of analyzing EWARS data received from the VBDRTC; first data covered the period April 28 to August 30, 2002.
- Resumed publication on a regular basis from June of the EWARS bulletin; continued summaries of cases and deaths for the six diseases reported in EWARS; added a new section on laboratory confirmation reports received from the sentinel sites.
- Explored ways to strengthen Japanese encephalitis (JE) laboratory diagnosis in the 24 endemic areas and to coordinate the collection, storage, transfer, and testing of

specimens; ways identified included: 1) assigning responsibility for overall coordination and strengthening JE laboratory diagnosis to the Epidemiology and Disease Control Division (EDCD), with EHP continuing to supply reagents to the referral labs and to facilitate external quality assurance; 2) providing hospitals and referral labs with guidelines for collecting, storing, transferring and testing of JE specimens; 3) recruitment of a logistics coordinator for the four referral labs; 4) assigning responsibility to the referral labs for giving feedback to the hospitals and EDCD; and 5) agreeing that data on JE results will be captured by EWARS.

## **Developing Sustainable Intervention Strategies for Prevention and Control**

### **Activities and Accomplishments**

- Continued to make progress launching the vector-borne disease program in Dhanusha-Mahottari Districts: newly recruited field assistants: 1) completed the data collection for the benchmark; 2) started orienting the communities on the program; 3) completed profiles of the Village Development Committees; 4) compiled a report on available human resources at health institutions in the two districts, and with program officers; 5) initiated health education programs for patients and caretakers in the kala-azar wards of the hospitals; and 6) finalized key behavior change messages based on the Nepal Social Marketing and Distribution behavior change strategy.
- Prepared a training-of-trainers package on kala-azar for field assistants and health facility staff and a training package for female community health volunteers and the community in collaboration with the Nepali Technical Assistance Group (NTAG).
- Used the training materials beginning in September in Dhanusha and Mahottari Districts.
- Drafted guidelines on referral systems and treatment follow-up: guidelines produced by NTAG with technical input from the Canadian Center for International Studies and Cooperation (CECI) and EHP.
- Reviewed key messages for behavior change communication for kala-azar; revised them; and field tested and refined all behavior change materials in consultation with Social Marketing and Distribution (materials include: wall paintings, posters, leaflets, flip charts; street dramas and broadcasts will also be presented).

## **Inter-Country Linkages for Cross-Border Prevention and Control**

### **Activities and Accomplishments**

- Held a meeting in Dhanusha, Janakpur, with health service representatives from Bihar state, India, and Nepal district health officials to initiate community-based cross-

border collaboration on the prevention and control of kala-azar and developed an action plan on information sharing, laboratory diagnosis, and case management.

### **Key Products**

- CD-ROM on the vector-borne disease program
- Year V Work Plan for EHP Nepal.

### **Plans for Next Quarter**

- Provide assistance in the preparation of a vector-borne disease strategy for USAID/Nepal.
- Consider new contract with CECI and NTAG based on proposal submission.

### **Issues and Problems**

- Security continues to be a major limiting factor in the monitoring and supervision of field activities.

## **Uganda: Reducing Urban Malaria Transmission**

### **Overview**

Malaria is a critical health problem in Uganda and has a dramatic impact on the health status of Uganda's rural population. Recent data indicating that malaria is also a problem in Kampala, Uganda's capital are part of a growing body of evidence that local malaria transmission is a problem in many African cities. The Uganda urban malaria activity will identify areas in two cities that appear to be at higher risk for malaria and will confirm local transmission, identify and characterize anopheline breeding sites, and involve stakeholder groups in a participatory process for preparing an action plan to eliminate or manage productive breeding sites. The action plan will be developed in partnership with and fully accepted by the local governments. This activity runs from September 2002 to July 2003 and will produce the action plan. The ultimate result expected from implementation of the action plan (anticipated in September 2003–June 2004) will be a measurable reduction in malaria transmission in the intervention areas.

### **Activities and Accomplishments**

- Identified local team members and entered into a subcontract with Med Biotech Laboratories to provide local coordination and data collection.
- Conducted team planning meeting with Lead EHP consultant.
- Initiated the activity with a planning visit by the lead consultant. Confirmed selection of Kampala and Jinja as sites for the study.

- Trained the local teams to collect entomological data.

### **Plans for Next Quarter**

- Complete clinical data collection in November.
- Complete first round of entomological data collection in November.

### **Issues and Problems**

- Additional discussions with local authorities were needed in Jinja, thus delaying the data collection by approximately one month.

## **Asia-Near East (ANE): Workshop on Standardizing Surveillance for Vector-Borne Diseases in BBIN Countries**

### **Overview**

In July 2000, EHP/Nepal organized a workshop on cross-border issues of surveillance and control of vector-borne diseases. The BBIN network was formed at this meeting—Bangladesh, Bhutan, India, and Nepal—and participants agreed to work towards standardizing vector-borne disease surveillance methods and sharing information on insecticide susceptibility and drug resistance. To facilitate achievement of these agreements, participants met for a workshop in May 2002 to reach agreement on an operation plan to standardize surveillance procedures for malaria, Japanese encephalitis, and kala-azar.

### **Activities and Accomplishments**

- Posted Bangladesh information on the BBIN web site.
- Disseminated two reports for review: “An Inventory of Insecticide Resistance for Malaria, Kala-Azar, and Japanese Encephalitis Vectors in Bangladesh, Bhutan, India and Nepal” and “An Inventory of Malaria Drug Resistance in Bangladesh, Bhutan, India and Nepal.”

### **Plans for Next Quarter**

- Continue review and revision of draft reports. Make arrangements for a workshop to standardize diagnostic and surveillance methods for Japanese encephalitis.

## **LAC: Best Practices in Dengue Control and Treatment**

### **Overview**

In the past ten years the number of cases of dengue and dengue hemorrhagic fever (DHF) has increased dramatically in Latin America and the Caribbean. *Aedes aegypti*, the

mosquito that transmits dengue, had been largely eradicated but has returned due to a range of factors including a lack of surveillance, poor prevention, control, and treatment programs, increased urbanization, lack of resources, and inadequate public education efforts. In recognition of the increasing importance of dengue fever as a public health problem, the Latin America and the Caribbean (LAC) Bureau has requested EHP to prepare a summary of best practices for the control and prevention of dengue. This summary report will be disseminated to Population, Health and Nutrition (PHN) staff in LAC region and may form the basis of a presentation to PHN staff during the next LAC PHN officers state-of-the-art (SOTA) meeting tentatively planned for March 2003.

### **Activities and Accomplishments**

- Conducted a team planning meeting for the lead consultant.
- Identified the best practices for control and prevention of dengue.
- Provided guidance to those who will write up the best practices.

### **Plans for Next Quarter**

- Complete the first draft of the best practices report.
- Review the first draft internally at EHP.
- Revise the draft and send it to external reviewers.

## **Task 4B: ECHO: Integrated Programs (ECHO/IP)**

### **Overview**

One of EHP's primary tasks is to assist in the design, evaluation, and dissemination of lessons learned in integrating field activities in community-based natural resource management and population and health. The primary vehicle for carrying out this task is a four-year activity in Madagascar. EHP is subcontracting with local organizations in key environmental corridors to support integrated activities. Because of USAID programs in population and health and natural resource management, Madagascar is an ideal country to conduct this activity.

### **Activities and Accomplishments**

- Assisted in organizing the general assembly meeting of the Voahary Salama (VS) in July.
- Assisted in formally establishing VS as a legally registered association in August.
- With the assistance of INSTAT, presented 2001 baseline survey results to the Malagasy Institute of Arts and Sciences.

- Revised the monitoring instruments.
- Organized a training-of-trainers workshop for community development workers in the context of cross training in health, population, and the environment.
- In collaboration with Tany Meva, conducted a mid-term evaluation of the integrated activities of the Department of Development, Church of Jesus Christ (SAF) and ASOS.
- Provided ongoing support to implementation of the community champion approach in the Fianar and Moramanga regions.
- Supported extending integrated activities in other villages in Moramanga and Fianar.
- Disseminated a range of information, education, and communication (IEC) tools developed by EHP.

### **Key Products**

- IEC materials supporting integrated activities.

### **Plans for Next Quarter**

- Establish a protocol with the government ministries that collaborate with VS.
- Establish a protocol for collaboration with the VS partners.
- Organize the visit of USAID/EHP in October.
- Present VS at a USAID conference in Madagascar.
- Recruit a new monitoring and evaluation coordinator.
- Evaluate the community champion approach in Beforana.
- Develop materials for the child-to-child and farmer-to-farmer approaches.
- Present IEC materials to other USAID partners, such as CARE and Catholic Relief Services (CRS).
- Get feedback from partners on the cross training.

### **Issues and Problems**

- The local EHP office is looking to rent an office space because the current space in PACT is not sufficient for the four staff members.

- EHP will not renew the contract of the current monitoring and evaluation coordinator but will recruit a replacement. It is expected that there will be overlap between the previous coordinator and the new one and that there will be no gap in services.

## **Task 6: Information Center**

### **Overview**

The Information Center carries out four basic activities: it 1) provides strategic information/communication/dissemination support to EHP core tasks (Policy and Lessons Learned, CESH, and ECHO); 2) maintains a data base of EHP activities; 3) develops partnerships for information exchange and sharing of technologies and for extending EHP's reach to new audiences; and 4) provides information and dissemination services to EHP and USAID staff and to the public through its web page.

### **Activities and Accomplishments**

#### **Strategy Support**

- Disseminated six issues of the *Malaria Bulletin* to 600 subscribers and six issues of the *Hygiene Bulletin* to 100 subscribers.
- Conducted literature searches and obtained articles for EHP and USAID staff on water and sanitation coverage by country, cholera outbreaks in Africa, private-sector research in Latin America, and other topics.
- Developed CD-ROMs of topical materials for the African Sanitation Conference and the WSSD Conference in Johannesburg and of selected EHP documents on EHP focus areas.

#### **Partnerships**

- Prepared materials for the Population and Health Materials Working Group meeting to be held in October.
- Continued collaboration with the Partnership in Social Science for Malaria Control.

#### **Information Services**

- Published two issues of EHP's e-newsletter, "EHP News"
- Published "EHP Brief 6: Improved Hygiene in Kinshasa Markers, Democratic Republic of Congo" and "EHP Brief 7: Improving Small Towns' Sanitation in Latin America and the Caribbean."

- Responded to approximately 630 information requests: from staff and consultants (175), USAID (90), international and nongovernmental organizations (180), developing countries (155), and others (30).
- Maintained and extended the reach of the EHP web site: during the quarter there were 19,748 visits to the site, compared with 15,620 the previous quarter.
- Disseminated documents (brochures, briefs, malaria bulletins, etc.) through the Internet: 27,240 files were viewed or downloaded from the EHP web site during the quarter; 1,148 reports were downloaded via USAID's Center for Development Information and Evaluation/Development Experience Clearinghouse (CDIE/DEC) web site during the quarter.
- Provided publication, editing, design, and translation support to EHP.
- Prepared a PowerPoint presentation on the urban health assessment in Ghana for a USAID meeting.
- Published three Activity Reports: # 110: *Support for Phase II of the Peru Lead Project to Determine Blood and Ambient Lead Levels in Metropolitan Lima and to Manage the Lead Exposure Problem in Critical Areas*; # 111: *Malaria Vector Studies in Eritrea*; # 112: *Eritrea: Field Studies on Efficacy of Bacterial Larvicides for Use in Malaria Control*.
- Published one Joint Publication: #5: *USAID Village and Sanitation Program, West Bank of Palestine: Environmental Health Assessment, Phase II*.
- Published one Strategic Report: #3: *Improving Sanitation in Small Towns in Latin America and the Caribbean: Practical Methodology for Designing a Sustainable Sanitation Plan* (in English and Spanish).
- Received and cataloged 16 Reports for the File.

### **Plans for the Next Quarter**

- Update web site.
- Produce E-Newsletter.
- Provide support for publication of quarterly reports.
- Provide support for publication of activity reports and strategic reports.
- Provide support for workshops and conferences.

## **Key Products**

See above.

## **Task 7: Urban Health**

### **India: Child Health and Nutrition among the Urban Poor**

#### **Overview**

In November 2000, a team of child survival and nutrition specialists from Washington, DC, and Delhi outlined how a modest level of resources could be invested in India to achieve USAID/India's strategic objective 3: improved child survival and nutrition in selected areas of India. The team found that in urban areas of the country, the health conditions of infants and children and the priorities for intervention are similar to those in rural areas: nutrition, neonatal health, immunization, and reduction of childhood illness and death due to acute respiratory infections (ARI), and diarrhea. Based upon the severity of the health conditions and the existence of successful urban health activities investigated, the team recommended that improved child health and nutrition among the urban poor in selected cities be one of four intermediate results for the strategic objective. Subsequently, in June and July 2001, EHP developed an approach, strategy, and work plan for an urban health program in support of the intermediate result and, in January 2002, developed a draft action plan for a five-year urban slum child health program. The USAID Regional Urban Development Office (RUDO) Program Officer, the USAID Child Survival Advisor, and the newly hired EHP Urban Health Program Director, as well as the directors of the USAID/India PHN and RUDO offices contributed to the development of the plan.

#### **Activities and Accomplishments**

- Held Indore urban stakeholders meeting in July.
- Held workshops for slum-based NGOs and community-based organizations (CBOs) in Indore in August.
- Hired local consultants to begin situation analysis and slum vulnerability assessment in Indore and Jamshedpur.
- Made a presentation on urban health to the USAID Making Cities Work seminar series.
- Began urban health section of the Jharkhand State development report.

#### **Key Products**

- PowerPoint presentations on India urban health program.

- Information sheet on how to calculate overhead and fringe benefits for small NGOs that are potential subcontractors.

### **Plans for Next Quarter**

- Finalize situation analysis of Indore.
- Continue situation analysis and slum-vulnerability assessment of Jamshedpur.
- Finish urban health section of the Jharkhand State development report.
- Hold pre-proposal workshops for NGOs and CBOs in Indore.
- Recruit and hire contracts officer and city-based coordinators.

### **Issues and Problems**

- A continuing issue being addressed by EHP/India, EHP headquarters and CDM is the development of a subcontracting and bank account/money transfer process that would make it possible to provide funds to local NGOs and CBOs to carry out program activities in conformity with the governments of the United States and India and with CDM regulations. Much progress has been made with everyone interested in finding a workable approach.

## **ANE Urban Health Initiative**

### **Overview**

The Asia/ Near East (ANE) region is characterized by rapid population growth and high urbanization rates. The urban population of Asia is expected to increase dramatically, from 1.2 billion in 1995 to 2.5 billion in 2025, with more than 400 million residing in cities of 10 million or more. The region is also characterized by high infant and child mortality, high maternal mortality, low female literacy, low status of women, high rates of malnutrition, and the rapid spread of HIV/AIDS. Concerned that USAID's health programming is not keeping pace with the reality of rampant urbanization and the dire conditions of small children in the region's slums, USAID's ANE Region health officers have developed a three-phased urban health activity which EHP will implement. The purpose of the activity is to persuade PHN officers in USAID's ANE missions to direct resources toward programs designed to meet the health needs of the urban poor, by assessing the state of current knowledge of urban slum populations, by carrying out demonstration activities in most marginalized slums in Cairo, and by offering practical guidelines for urban slum health program development and implementation.

### **Activities and Accomplishments**

- Drafted and revised a concept paper for the Egypt urban health activity.

- Developed scopes of work for scoping and designing the activity.
- Coordinated with USAID/ Economic Growth, Agriculture, and Trade Bureau (EGAT)/Urban Programs to respond to their interest in collecting DHS data in urban slums.
- Identified a consultant to be the design team leader.

### **Key Products**

- Concept Paper: Cairo Urban Slum Child Health Program.

### **Plans for Next Quarter**

- Carry out scoping trip to Cairo.
- Finalize the scope of work for program design.

## **Ghana: Urban Health Assessment**

### **Overview**

EHP was asked by USAID/Washington EGAT Bureau/Urban Programs and Global Health to carry out an assessment of the health needs of the urban poor in Ghana and provide a road map for future mission interventions. The assessment was to include a desktop study with original interviews both in Ghana and in the United States. Targeted cities are Accra and Kumasi. The idea for the assessment grew out of a visit to Ghana by staff from USAID's Urban Programs and the EHP Cognizant Technical Officer (CTO). The assessment information will be used to feed into the development of the mission's country health program strategy.

### **Activities and Accomplishments**

- Conducted urban health assessment in Accra and Kumasi during July (including debriefing mission, presentation of results to USAID, and preparation of a written report).

### **Key Products**

- Draft report: "Ghana Urban Health Assessment."
- PowerPoint presentation on assessment findings.

### **Plans for Next Quarter**

- Present draft report to USAID mission for feedback.

- Revise, finalize, and disseminate the report.

## **Issues and Problems**

- The staff in the Ghana mission has turned over since the EHP team made its visit. Questions have arisen about what the changes might imply.

## **Peru: Urban Environmental Health**

### **Overview**

The purpose of this activity is to reduce health risks associated with exposure to locally generated contaminants and pathogens in peri-urban residential neighborhoods and communities. This purpose will be achieved by addressing environmental health threats through four types of interventions: 1) helping Peruvian agencies with environmental health responsibilities to improve their policies; 2) carrying out pilot projects to demonstrate innovative ways of addressing environmental health needs; 3) providing technical assistance, training, and local institutional strengthening; and 4) developing capacity in environmental health risk monitoring. EHP will provide support to the Ministry of Health's General Directorate of Environmental Health (DIGESA) and to the implementing PVOs and local authorities. The activity grew out of an earlier effort to reduce lead exposure in slum areas of Callao through behavioral change.

### **Activities and Accomplishments**

- Began final stage of work on the assessment of the national environmental health surveillance system.

### **Plans for Next Quarter**

- Finalize the assessment of the national environmental health surveillance system.

## **'Other' Tasks**

### **Dominican Republic: Decentralization of Rural Water and Sanitation Services**

#### **Overview**

USAID/Dominican Republic and the National Water Supply and Sewerage Institute (INAPA), which is the national water utility, have agreed to work together and co-finance a pilot rural water supply and sanitation project in Hato Mayor Province. The joint effort allows INAPA to develop and test approaches to implement its decentralization strategy, which will subsequently be scaled up to the national level. The pilot project applies the total community participation model and constructs sanitation systems and water supply infrastructure. USAID provides INAPA with technical assistance and training. Entrena (a

local contractor) manages the NGO contracts under the pilot project, and EHP provides technical assistance to help develop and strengthen INAPA's capacity to implement the decentralization strategy, using the pilot project as its testing ground. (This activity officially ended on December 31, 2001. However, EHP and USAID/Global Health agreed to use CESH core funds to write an EHP report describing the work in the Dominican Republic over the last four years and placing it in the context of the hygiene improvement framework.)

### **Activities and Accomplishments**

- Published the final summary report of the activity (see title below).

### **Key Products**

- EHP Strategic Report #4: Creating an Enabling Environment for Community-based Rural Water Supply, Sanitation, and Hygiene Promotion Systems—Case Study: Reforming the Rural Department of the National Water Agency (INAPA) in the Dominican Republic.

### **Plans for Next Quarter**

- USAID/DR is likely to provide EHP with a modest MAARD to hire a local consultant to provide ongoing coaching to INAPA so that the technical assistance that has been provided is not lost. During the next quarter, a scope of work for this effort in partnership with the mission and INAPA will be developed.

## **Dominican Republic: Community-Level Hygiene Behavior Change**

### **Overview**

The purpose of this activity is to strengthen the behavior-change component of the community health, water, and sanitation interventions currently under way within the USAID/Dominican Republic reconstruction program in order to achieve the maximum project health impact. EHP will provide assistance to Entrena, NGOs involved in water supply and sanitation reconstruction efforts, and the Ministry of Health to design and implement a strategy to prevent diarrheal disease through improved hygiene behaviors. An interactive approach will identify NGO strengths and work in a participatory fashion to improve the community-level behavior-change capacity of the NGOs and the Ministry of Health. The basic approach is to improve the behavior-change component by strengthening the capacity of the participating NGOs to design and implement behavior change activities. This technical assistance will be coordinated with technical assistance for community-level behavior change in the areas of nutrition and social mobilization for vaccinations, and ultimately it will be incorporated into the Dominican IMCI model. (This activity ended December 31, 2001. Nevertheless, EHP and USAID/Global Health agreed to provide additional CESH core support to allow the consultant to return to the Dominican Republic in April 2002 to assess the behavior-change program and to write a final report.)

## **Activities and Accomplishments**

- Drafted and translated the final report (however, the quality of the report was poor).

## **Plans for Next Quarter**

- Rewrite the final report.

## **Latin America and the Caribbean: Decentralization**

### **Overview**

The primary purpose of this activity is to develop case studies on decentralization of water supply and sanitation systems in Latin America. The case studies have been completed, and all that remains is ongoing dissemination. With the remaining funds in the activity, EHP initiated an activity to develop guidelines for creating an institutional support mechanism to provide backup to rural water supply and sanitation systems – one of the main themes of the case studies.

### **Activities and Accomplishments**

- Conducted a team-planning meeting in early July for a consultant to develop guidelines for creating an institutional support mechanism.
- Completed first draft of the guidelines.

### **Key Products**

- “Creating Institutional Support Mechanisms for Rural Water and Sanitation Systems” appeared in the July edition of *Waterlines*.

### **Plans for Next Quarter**

- Review and revise first draft of guidelines
- Have the revised draft reviewed externally.
- Edit and publish the document.

# Task Order 2

## Malaria Vaccine Development Program (MVDP)

### Overview

Support for the USAID Malaria Vaccine Development Program (MVDP) is conducted by EHP through Task Order 2 under its contract with USAID. The task's planned duration is five years (August 1, 1999, through July 31, 2004).

### Activities and Accomplishments

- Supported the MVDP through the work of the MVDP technical adviser (and through a subcontract with Dr. Tony Holder at the National Institute for Medical Research, London).
- Prepared for and followed up on vaccine team meetings (AMA1, MSP1, ESC, and PfEMP1).
- Followed up on the May 2002 meeting of the Scientific Consultants Group, including writing and distributing minutes.
- Prepared for, attended, and followed up on the European Malaria Vaccine Initiative Meeting held in Geneva, Switzerland, in September.
- Reviewed portions of an investigational new drug application to the U.S. Food and Drug Administration for the *Escherichia coli* Apical Membrane Protein 1 (AMA1) vaccine target antigen.
- Participated in other technical planning and monitoring meetings throughout the quarter.

### Plans for Next Quarter

- Continue to participate in antigen team meetings.
- Plan for upcoming clinical trials with AMA1 and MSP1.
- Continue to follow up on European Malaria Vaccine Initiative in September.
- Plan the next Scientific Consultants Group meeting to take place in January 2003.
- Consider the possibility of attending the GSK-WRAIR-Crucell meeting in Amsterdam and the WRAIR-Crucell meeting in Brussels.

# Task Order 801

## El Salvador: Legal and Regulatory Reform of the Water Sector

### Overview

This activity is intended to support the legal and regulatory reform of the water sector in El Salvador, including both the water resources and the water supply and sanitation subsectors. In Phase I, which took place from May-December 2000, EHP assisted in reviewing and discussing key elements of two draft laws—one for water resources and the other for regulation of water supply and sanitation. These draft laws have been put on hold by the National Aqueduct and Sewerage Administration (ANDA) and may not be resurrected. Phase II, which was originally intended to assist the Legislative Assembly in reviewing the laws, will instead be focused on the more immediate issue of developing an institutional model to provide backup support to rural communities after the water and sanitation systems are operational.

### Activities and Accomplishments

- Wrote the final summary report.

### Plans for Next Quarter

- The activity ended September 30, 2002.

# Task Orders 803 and 804

## West Bank: Village Water and Sanitation Program (VWS): Health, Governance, Waste Water Re-use Studies, Designs, Program

### Overview

The original purpose of USAID's West Bank Village Water and Sanitation Program (VWS) was to provide safe and sustainable water and sanitation services to 44 rural towns serving a population of 135,000 in the West Bank. The program was to focus on communities in the West Hebron and South Nablus areas. The VWS program supported one of the strategic objectives of USAID/West Bank: to provide greater access to and more effective use of scarce water resources. Work was to be carried out in collaboration with the Palestinian Water Authority, as well as the Ministries of Agriculture, Environmental Affairs, Health, Local Government, and Planning.

Implementation was to be carried out under three separate task orders:

- Task order 802: Engineering Studies. Now completed.
- Task order 803: Health, Governance, Wastewater Reuse Studies, Designs, and Program. The preparation of feasibility studies and the design of programs for improved community education and governance to improve water, sanitation, hygiene, and agricultural practices.
- Task Order 804: Engineering Designs. Development of designs and procurement packages for all of the proposed facilities.

In April 2002, the scope of EHP's work was expanded to include coordination of USAID's response to a humanitarian crisis brought about by the invasion and prolonged occupation of major Palestinian cities by the Israeli Defense Forces beginning on March 20, 2002. Task Orders 803 and 804 were converted to an emergency operation consisting of providing emergency water supplies and assessing water needs and availability and the planned activities were deferred.

### **Activities and Accomplishments**

- Amended the task orders to provide for the resumption of some previously deferred activities and for expanded support for emergency water-supply efforts of the Palestinian Water Authority (\$4.4 million in additional funding of commodity procurement).
- Carried out the following emergency-assistance activities: supported the Emergency Water Operations Center (EWOC), monitored water shortages to map areas most in need, provided emergency commodity support to municipalities and developed emergency-response plans for the future.
- Carried out the following previously deferred activities: implemented a follow-up household survey of 300 households in VWS target communities (included diarrheal disease prevalence survey of children under five and water-quality testing), and prepared engineering designs for new and rehabilitated sources and networks in West Hebron and Nablus.

### **Plans for Next Quarter**

- Disseminate the final institutional assessment documents produced by the American Near East Refugee Aid (ANERA).
- Complete the follow-up survey and disseminate its results.
- Initiate work on a generic design of an environmental health component to support the VWS.
- Complete all work for Contract A villages of West Hebron (those with no current networks).

- Continue work for Contract B villages of West Hebron (those with existing networks needing rehabilitation).
- Initiate work for southeastern Nablus villages (Rajieb well, Aqraba pumping station, storage systems, and new distribution networks for Aqraba, Awarta, Osarin, Qaryut, and others).
- Complete design for the Beit Dajan well facility and tanker filling point in Nablus.
- Formalize the management processes in support of EWOC (including planning and coordination forums, procurement procedures, etc.).
- Continue to support emergency response and emergency preparedness needs.



# Milestones

## Year 4 Milestones, Status as of the First Quarter

Shaded cells indicate target date for completion; those with “x” indicate that the target was achieved.

Task/Milestone	1stQ	2 <sup>nd</sup> Q	3 <sup>rd</sup> Q	4 <sup>th</sup> Q	Comments
<b>Task 1: Work Plan</b>					
• Finalize and submit work plan to USAID					
<b>Task 2: Lessons Learned &amp; Policy</b>					
• Host WSSCC M&E Task Force meeting.					
• Organize one technical meeting to review Vision 21 monitoring tests.					
• Annual performance and milestone report					Draft prepared
• Support to the WSSD meeting in Johannesburg, South Africa.	x				
• Support to Kyoto meeting.					
• Abstracts submitted for Global Health Council Conference.	x				
• Active participation in Global Health Council Annual Meeting.					
• Three policy documents published or in draft.					
• Develop an agenda and implement a C-IMCI workshop for LAC with BASICS and the CORE IMCI working group.					
• Participate in a USAID request for a mission partnership activity for scaling up of C-IMCI, with a concrete EHP role established in at least one country.	x				
• Compile and document successful EHP partnerships in a short advocacy brief.					
<b>Task 3: CESH</b>					
• Dedication of core funds to support a field-based operations research project in	x				

Task/Milestone	1stQ	2 <sup>nd</sup> Q	3 <sup>rd</sup> Q	4 <sup>th</sup> Q	Comments
partnership with local specialists.					
• Sanitation policy assessment guidelines published by EHP.	x				
• Quantitative assessment tool refined based on findings from field application.					
• Community-based monitoring tool developed and field opportunities identified for its application and testing.					
• Working draft of the CESH action learning guide for behavior change for diarrheal disease reduction completed.					
• Draft of situation analysis tool completed (Background paper completed by H. Lockwood).					
• Minutes of meetings of stakeholders and activity managers involved in CESH produced and widely distributed.	x				
• Core CESH funds to facilitate hygiene improvement dedicated in one or more targeted countries as part of a GDA partnership.					
• Two-year action plan to provide technical assistance to DRC SANRU finalized and supported.	x				
• Substantive progress made in the field, working with NGOs to develop draft diarrheal disease prevention modules.					
• Opportunity for focused effort in Nepal to assist the ongoing long-term work of sectoral partners identified and supported.					Identified
• Focused program of support to NicaSalud developed and supported.					Identified
• Focused program of support to local partners in the Dominican Republic developed and supported.	x				
• EHP reports on urban environmental health activities in the DRC and behavior change activities in the Dominican Republic published and disseminated.					
<b>Task 4A: ECHO/XS &amp; IVM</b>					
<b>ECHO/XS Core</b>					
• XS TWG meeting and report.	x				

Task/Milestone	1stQ	2 <sup>nd</sup> Q	3 <sup>rd</sup> Q	4 <sup>th</sup> Q	Comments
• XS: Concept paper: Improving information for malaria control decision.					
• Malaria risk stratification: methods and applications.					
<b>ECHO/IVM Core</b>					
• Draft guidelines for IVM.					Deferred pending further direction from WHO/AFRO
• Session on larva control at the Third Pan-African Conference on Malaria.					
• Field test of the vector control needs assessment protocol.					
<b>ECHO/XS &amp; IVM Field Programs</b>					
<b>Nepal</b>					
• Review of VBDRTC progress in implementation of the work plan.					
• Recommendations from the Meeting on Standardization of Community-Based Kala-azar Surveillance and Case Management in Dhanusha/Mahottari, Nepal, and the Adjoining Districts of Bihar State, India.					
• Evaluation report of improved EWARS strategy in eight sentinel sites..					
• Recommendations on SO4, interventions 1 through 4, prepared in draft for further adjustments in Year 5.					
<b>Eritrea</b>					
• Protocols and training for sentinel site staff.	x				
• Complete review of the malaria vector control program.					
• Report of results for larva control pilot programs.					
• Support to midterm review of the NMCP Five-Year Plan for Rolling Back Malaria.					

Task/Milestone	1stQ	2 <sup>nd</sup> Q	3 <sup>rd</sup> Q	4 <sup>th</sup> Q	Comments
<b>Uganda</b>					
• Situation analysis completed.					
<b>ANE Region</b>					
• Regional workshop on Japanese encephalitis surveillance.					
• Regional workshop on kala-azar surveillance.					
<b>ECHO/XS &amp; IVM: LAC- Dengue Fever</b>					
• Best practices document completed.					
• Presentation to the LAC regional PHN SOTA meeting.					
<b>Task 4B: ECHO/IP/Madagascar</b>					
• General assembly meeting of Voahary Salama.	x				
• Institutionalization of VS as a legal entity.					
• Training-of-trainers workshop for community development agents.	x				
<b>Task 6: IC</b>					
• Changes to the web site implemented, based on assessment recommendations, and report prepared.	x				
• A series of web-based bibliographies on diseases related to water supply and sanitation and certain vector-borne diseases developed.					
• One joint e-conference facilitated.					
• EH web ring established with other relevant web sites.					

## End-of-Project Results Achieved to Date

### Policy and Lessons Learned

#	Result	Indicator	Progress to Date
1.	Monitoring and evaluation plan <i>implemented</i> for CESH and ECHO.	Monitoring and evaluation plan with project-level and task-specific indicators.	EHP has developed a Monitoring and Evaluation Plan and is using it for monitoring CESH and ECHO activities.
2.	Indicators for water, sanitation, and hygiene that go beyond coverage and access <i>developed</i> , in collaboration with other organizations, and <i>tested</i> in CESH field programs.	List of indicators and data collection methods developed.	EHP has --Developed a comprehensive environmental health assessment that includes intestinal parasites as proximate measures for changes in water, sanitation and hygiene practices as well as water quality. --Tested a comprehensive environmental health assessment tool containing a core set of hygiene improvement indicators in the West Bank (March 2002). -Prepared draft indicators.
3.	Indicators and data-collection instruments for cross-sectoral surveillance with a focus on malaria <i>developed</i> and <i>tested</i> , in coordination with WHO and other organizations.	List of indicators and instruments for cross-sectoral surveillance and IVM.	
4.	Four major international meetings <i>supported</i> by EHP participation and two <i>organized</i> by EHP.	Number of major international meetings in which EHP participates and which it organizes.	EHP has met the end-of-project target of organizing two major international meetings: 1. 2000, the Global Consultation on the Health Impacts of Indoor Air Pollution.. 2. December, 2001, Monitoring and Evaluation of Water, Sanitation and Hygiene Behaviors, Delft, Netherlands. EHP played a role in organizing this policy meeting, which included the participation of approximately 15 professionals from WHO, UNICEF, WELL, LSHTM, IRC, and EHP. Consensus was reached on the establishment of a monitoring network to pursue agreed upon

#	Result	Indicator	Progress to Date
			<p>objectives for advancing the state of the art in monitoring.</p> <p>3. EHP organized an E-Forum on Hygiene Promotion, a month-long e-conference on EHP's hygiene improvement framework with a final report.</p> <p>EHP has met the end-of-project target by actively participating in four major international meetings:</p> <ol style="list-style-type: none"> <li>1. Respiratory Diseases and the Environment, Lucknow, India.</li> <li>2. November, 2000. Water Supply and Sanitation Collaborative Council meeting, Iguacu, Brazil.</li> <li>3. November, 2001. American Public Health Association annual meeting.</li> <li>4. May, 2002. Global Health Council annual meeting.</li> </ol>
5.	Major policy issues of global importance in CESH and ECHO <i>identified</i> and five reports <i>produced</i> to contribute to their consideration.	Number of reports published.	EHP published a policy report on public-private partnerships for promoting hand washing.

### Community-Based Environmental Sanitation and Hygiene

#	Result	Indicator	Progress to Date
1.	Two operations research questions on diarrheal disease prevention in CESH programs <i>studied</i> and results <i>documented</i> .	Number of questions studied.	EHP is studying one operations research question: the safe disposal of children's excreta. The desk study is being implemented by the International Institute for Nutrition in Peru.
2.	At least one tool developed under CESH to promote environmental sanitation as national policy <i>applied</i> in five USAID-assisted countries.	Number of USAID-assisted countries in which tools have been applied.	Tool developed.
3.	Tools to assist non-governmental organizations (NGOs), governments, and communities to identify priorities and to select, implement, and evaluate interventions <i>developed</i> .	Tools developed, applied, and documented to (1) identify local priority environmental conditions related to diarrheal disease prevention, (2) to guide selection of interventions, (3) to guide implementation and monitoring, and (4) to evaluate impact on behaviors related to diarrheal disease in children under five.	EHP is developing two tools: 1. As part of development of HIQAT, gathering baseline information in the field in advance of program implementation to identify local priority environmental conditions related to diarrheal disease prevention and to evaluate impact on behaviors related to diarrheal disease in children under five—now being refined. 2. Action learning guide on behavior change for hygiene improvement to guide selection of interventions and to evaluate impact on behaviors related to diarrheal disease in children under five—now being developed by the Manoff Group.
4.	Activities using tools developed under result #3 <i>implemented</i> in at least three USAID-assisted PHN countries.	Number of USAID-assisted PHN countries which apply tools.	Field experience in Benin, Nicaragua, Dominican Republic and DR Congo is being used in development of CESH tools.

### Environmental Change and Health Outcomes/Cross-Sectoral Surveillance

#	Result	Indicator	Progress to Date
1.	Methods for cross-sectoral surveillance <i>developed and tested</i> .	Number of methods tested.	EHP has developed and has tested or is testing four methods: 1. Risk stratification at the national level, in Eritrea 2. Risk stratification at the local level, in Mozambique 3. Characterization of larval habitats, in Eritrea, Mozambique, and Nepal. 4. Routine surveillance of larval and adult mosquito populations in Eritrea and Uganda.
2.	Tools to promote the use of cross-sectoral surveillance <i>developed</i> .	Number of tools developed for promoting the use of cross-sectoral surveillance.	EHP has developed three tools for promoting cross-sectoral surveillance: 1. Draft activity report on risk stratification. 2. Draft activity report and professional journal articles on vector studies. 3. Draft activity report on a national prevalence survey in Eritrea.
3.	Cross-sectoral surveillance methods adopted as part of official MOH surveillance procedures policy in three USAID-assisted PHN countries.	Number of countries in which cross-sectoral surveillance methods have been promoted.	Eritrea: The USAID-assisted country has adopted cross-sectoral surveillance methods as a result of EHP assistance and advocacy.

#### Environmental Change and Health Outcomes/Integrated Vector Management

#	Result	Indicator	Progress to Date
4.	Effectiveness of vector control interventions determined and appropriate settings for each <i>identified</i> .	Number of tests and evaluations supported by EHP.	EHP has supported two tests and evaluations – both in Eritrea: 1. Efficacy of <i>Bacillus thuringiensis</i> and <i>Bacillus sphaericus</i> (Bt and Bs). 2. Pilot larval control programs in four villages for determining effectiveness and cost.
5	IVM approaches appropriate for controlling malaria in urban and rural settings in Africa <i>developed</i> .	Number of settings for which IVM approaches have been developed.	EHP has defined integrated vector management control approaches for six different settings in Africa.
6.	The use of IVM approaches promoted as part of official national malaria control plans and procedures in two or more African countries.	Number of countries in which EHP has promoted the use of IVM approaches.	EHP has promoted the use of integrated vector management approaches in one country: Eritrea.
7.	Regional collaboration and control of malaria, Japanese encephalitis and kala-azar <i>promoted</i> among Bangladesh, Bhutan, India and Nepal	Number of diseases for which BBIN countries have adopted standard methods for case definition, diagnosis, surveillance and reporting.	BBIN countries have agreed to adopt standard methods for three diseases; implementation is underway for Japanese encephalitis.

#### Environmental Change and Health Outcomes/Integrated Programs

#	Result	Indicator	Progress to Date
1.	Potential for scaling up integrated health, population, and environment program in rural settings along environmental corridors in Madagascar <i>evaluated, documented, and disseminated</i> .	Integrated health-population-environment evaluation approach developed, tested, applied, and disseminated.	Four-year activity well underway in Madagascar. Evaluation will take place in Year 5.

# **Annex**

## **List of Products**

### **Task Order 1**

### **Task 2: Policy and Lessons Learned**

- Revised list of hygiene improvement survey questions

### **Task 3: Community-Based Environmental Sanitation and Hygiene (CESH)**

#### **Environmental Sanitation Policy**

- EHP Strategic Report 2: Guidelines for the Assessment of National Sanitation Policies.

#### **Latin America and the Caribbean: Sanitation in Small Towns**

- EHP Strategic Report 3: Improving Sanitation in Small Towns in Latin America and the Caribbean.
- Article on sanitation in small towns published in July issue of Waterlines.

### **Task 4: Environmental Change and Health Outcomes (ECHO)**

#### **Task 4A: ECHO: Cross-Sectoral Surveillance (XS) and Integrated Vector Management (IVM)**

#### **ECHO/XS and IVM Field Programs**

#### **Eritrea: Technical Assistance to the Eritrea National Malaria Control Program**

- Malaria Vector Control Studies in Eritrea (activity report ready for editing).
- Malaria Vector Studies in Eritrea (activity report ready for editing).

#### **Nepal: Inter-Country Linkages for Cross-Border Prevention and Control**

- CD-ROM on the vector-borne disease program
- Year V Work Plan for EHP Nepal.

## **Task 4B: ECHO: Integrated Programs (ECHO/IP)**

- IEC materials supporting integrated activities.

## **Task 6: Information Center**

### **Products Published**

- Two issues of EHP News (EHP's e-newsletter)
- Activity Report 112. *Eritrea: Field Studies on Efficacy of Bacterial Larvicides for Use in Malaria Control*. English. Josephat I. Shililu. 26568/E.X.ER2.LARVCTRL. 12/01/01
- Activity Report 111. *Malaria Vector Studies in Eritrea*. English. Josephat I. Shililu. 26568/E.X.ER.IMPLEMENTATION. 12/1/01
- Activity Report 110. *Support for Phase II of the Peru Lead Project to Determine Blood and Ambient Lead Levels in Metropolitan Lima and to Manage the Lead Exposure Problem in Critical Areas*. Carlos, Alberto Zavaleta. 26568/IC.YR4.SERV. 07/02/02
- EHP Brief 7: *Improving Small Towns' Sanitation in Latin America and the Caribbean*. EHP Staff. 26568/IC.YR4.SERV. August 2002.
- EHP Brief 6: *Improved Hygiene in Kinshasa Markets, Democratic Republic of Congo*. EHP Staff. 26568/IC.YR4.SERV. July 2002.
- Joint Publication 5. *USAID Village and Sanitation Program West Bank of Palestine—Environmental Health Assessment—Phase I*. English. Ali Sha'Ar, Eckhard Kleinau, Patrick Kelly. 26568/IC.YR4.STRAT.SUP.7/2/02
- Strategic Report 3S. *Mejoramiento del saneamiento en las ciudades pequeñas de América Latina y el Caribe \* Metodología práctica para diseñar un plan de saneamiento sostenible*. Spanish. Scott Tobias, Jeanine Corvetto, Eduardo A. Perez, Fred Rosensweig. 26568/OTHER.LACSAN.METHODOLOGY.8/2/02
- Strategic Report 3. *Improving Sanitation in Small Towns in Latin America and the Caribbean — Practice Methodology for Designing a Sustainable Sanitation Plan*. English. Scott Tobias, Jeanine Corvetto, Eduardo A. Perez, Fred Rosensweig. 26568/OTHER.LACSAN.METHODOLOGY.8/2/02

### **Products Archived**

- Report for the File 406. *Estudios Comunitarios Comparativos Sobre Cambios de Comportamientos Higienicos Sanitarios (Documentos Anexos)*. Spanish. EHP Staff. 27052/NIC.MANAGUA.12/1/02

- Report for the File 405. *Trip Report, AFRICAN, African Sanitation and Hygiene Conference*. English. Eduardo A. Perez. 26568/CESH.SANITATION.AFRICA. 8/7/02
- Report for the File 404. *Preliminary Design Report for the West Hebron Service Area Distribution System Network, Final Report*. English. EHP Staff. HRN-I-802-99-00011-00. 2/10/02
- Report for the File 403. *Feasibility Report for Water Systems in the South Nablus Area, Final Report*. English. EHP Staff. HRN-I-802-99-00011-00. 2/10/02
- Report for the File 402. *Village Wastewater System Feasibility Report for the West Hebron and South Nablus Clusters, Final Report*. English. EHP Staff. HRN-I-802-99-00011-00. 2/11/02
- Report for the File 401. *Trip Report Nepal: Review CECI Intervention Activities, Nepal Year V Workplan*. English. Lisa Nichols. 26568/NEPAL.E.X.NE4.INTERVENTION. 7/2/02
- Report for the File 400. *EHP II Year 3 Quarterly Report 3, January-March 2002*. English. EHP Staff. 26568/LLP.ME.Y3.PE. 7/24/02
- Report for the File 399. *EHP II Year 3 Quarterly Report 2, October-December 2001*. English. EHP Staff. 26568/LLP.ME.Y2.PE. 7/24/02
- Report for the File 398. *EHP Trip Report: Development of a Supervisory System for Environmental Health Technicians--Honduras, May 26, 2002*. English. Dennis Kalson. 26568/OTHER.HONDURAS.TSA. 7/10/02
- Report for the File 397. *EHP II Trip Report: WSSCC: Task Force on Monitoring and Strategic Planning Meeting*. English. Sandy Callier, Eeckhard Kleinau. 26568/LLP.PART.Y3. 6/27/02
- Report for the File 396. *Manual de Recursos para la Participacion Comunitaria en Proyectos de Agua Potable, Saneamiento, y Cambio de Comportamiento en la Higiene: Tomo 4: Sostenibilidad del Sistema de Agua*. Spanish. Unidad Ejecutora de Acueductos Rurales, Instituto Nacional de Aguas Potable, EHP Staff. 26568/OTHER.DO2.INAPA.HATOMAYOR. 12/1/02
- Report for the File 395. *Manual de Recursos para la Participacion Comunitaria en Proyectos de Agua Potable, Saneamiento, y Cambio de Comportamiento en la Higiene : Tomo 3: Saneamiento y Cambio de Comportamiento en la Higiene*. Spanish. Unidad Ejecutora de Acueductos Rurales, Instituto Nacional de Aguas Potable, EHP Staff. 26568/OTHER.DO2.INAPA.HATOMAYOR.12/1/02
- Report for the File 394. *Manual de Recursos para la Paticipacion Comunitaria en Proyectos de Agua Potable, Saneamiento, y Cambio de Comportamiento en la Higiene: Tomo 2: Organizacion Comunitaria*. Spanish. Unidad Ejecutora de

Acueductos Rurales, Instituto Nacional de Aguas Potable, EHP Staff.  
26568/OTHER.DO2.INAPA.HATOMAYOR. 12/1/02

- Report for the File 393. *Manual de Recursos para la Participacion Comunitaria en Proyectos de Agua Potable, Saneamiento, y Cambio de Comportamiento en la Higiene: Tomo 1: INAPA/UEAR y la Comunida Rural*. Spanish. Unidad Ejecutora de Acueductos Rurales, Instituto Nacional de Aguas Potable, EHP Staff. 26568/OTHER.DO2.INAPA.HATOMAYOR.12/1/02
- Report for the File 392. *EHP II Year 3 Quarterly Report 1 July -September 2001*. English. EHP Staff. 26568/LLP.ME.Y3.PE 6/2/02
- Report for the File 391. *The Environmental Health Project Website Assessment*. Adam Shannon. 26568/IC.YR3.SERV. 07/02/02

## **Task 7: Urban Health**

- PowerPoint presentations on India urban health program.
- Information sheet on how to calculate overhead and fringe benefits for small NGOs that are potential subcontractors.

### **ANE Urban Health Initiative**

- Concept Paper: Cairo Urban Slum Child Health Program.

### **Ghana: Urban Health Assessment**

- Draft report: “Ghana Urban Health Assessment.”
- PowerPoint presentation on assessment findings.

## **‘Other’ Tasks**

### **Dominican Republic: Decentralization of Rural Water and Sanitation Services**

- EHP Strategic Report #4: Creating an Enabling Environment for Community-based Rural Water Supply, Sanitation, and Hygiene Promotion Systems – Case Study: Reforming the Rural Department of the National Water Agency (INAPA) in the Dominican Republic.

### **Latin America and the Caribbean: Decentralization**

- “Creating Institutional Support Mechanisms for Rural Water and Sanitation Systems” appeared in the July edition of *Waterlines*.

